

# STATEMENT OF ORGANIZATION

RECEIVED  
FEC MAIL ROOM

2001 FEB 13 P 1:31

1. (a) NAME OF COMMITTEE IN FULL <b>PEOPLE FOR ENTERPRISE, TRADE AND ECONOMIC GROWTH</b>		<input type="checkbox"/> (Check if name is changed)	2. DATE <b>2/1/01</b>
(b) Number and Street Address <b>3616 KING STREET # 146</b>		<input type="checkbox"/> (Check if address is changed)	3. FEC Identification Number <b>C00 363770</b>
(c) City, State and ZIP Code <b>ALEXANDRIA, VA 22302</b>		4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

**5. TYPE OF COMMITTEE (CHECK ONE)**

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
|-------------------|-----------------------------|---------------|----------------|
- (c) This committee supports/opposes only one candidate \_\_\_\_\_ and is not an authorized committee.  
(name of candidate)
- (d) This committee is a \_\_\_\_\_ committee & of the \_\_\_\_\_ Party.  
(NATIONAL, STATE or SUBDIVISION) (DEMOCRATIC, REPUBLICAN, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Associated Committee	Mailing Address and ZIP Code	Relationship
<b>NONE</b>		

**Type of Connected Organization**

Corporation  Corporation w/o Capital Stock  Labor Organization  Membership Organization  Trade Association  Cooperative

**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

Title or Position

**MARTIN E. MCGUINNESS** (see below) **TREASURER**

**8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name

Mailing Address

Title or Position

**MARTIN E. MCGUINNESS** **3620 S. TAYLOR ST.** **ATLINGTON, VA 22206** **TREASURER**

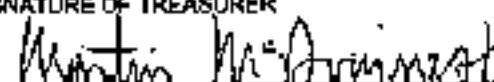
**9. Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Mailing Address and ZIP Code

**CITIBANK, P.S.B.** **1000 CONNECTICUT AVENUE, NW** **WASHINGTON, DC 20036**

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER <b>MARTIN MCGUINNESS</b>	SIGNATURE OF TREASURER 	DATE <b>2/1/01</b>
---	--	-----------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

--	--	--

For further information contact:  
Federal Election Commission  
Toll-free 800-424-9530  
Local 202-894-1400

REGISTRATION

**FEC FORM 1**

(revised 4/87)